EXHIBIT E

Superior Court

-125-

of Accounts Tegucigalpa, M.D.C. Honduras, C.A.

SWORN INCOME, ASSETS AND LIABILITIES STATEMENT

	File No
	Folio No.
First time entry into position or public service	
Re-entry into position or public service	\boxtimes
End of position	

A. DECLARANT'S LEGAL INFORMATION

First Name:	Juan	Middle Name: Mai	Middle Name: Manuel			
First surname:	Avila	Second Surname: N	leza			
Identification No. 03	101970 00878	National Taxpayer R	egistration	: 03181970008285		
Plade and Date of Bi	rth: Sigua	tepeque 08/22/1970	Sex: F □	M⊠		
Profession or Occupa	ation: Police Office	er and Lawyer	Mai	rital Status:		
Home address:	Col. Loma Linda	Sur	Married	Single □		
House 31	33		-			
Tel. 22394203		Fax:				
Email: <u>nellavila@</u>	Email: nellavila@yahoo.com.mx					
	F	RELATED DEPENDENTS				
Names of	Dependents	Relations	ship	Age		
Alicia Nollia Yacub Bo	ortrand	Wife		49		
Juan Manuel Avila G	utierrez	Son		15		
Luisa Yolanda Avila V	'alle	Daughte	r	14		
Alizstram Avila Yacul)	Son		6		
Irma Yolanda Meza F	Pulpa	[Illegible]	65		
If your spouse or domestic partner files a separate Sworn Statement, provide File Number:						

B.2 SPOUSE OR DOMESTIC PARTNER'S WAGE INCOME

Ministry or institution: -0-									
Department or a	Department or area of work: -0-								
Work address:	-0-								
		-0-							
		-0-							
Tel.:	-0-	Fax:		email: -0-					
Wages: -0-			L.						

B.3 OTHER INCOME

Yes ⊠

No □

(Income resulting from business, profesional activities, rents, dividends, pensions, additional work, bonuses, [Illegible], or any other type of income. Include same information for your spouse or domestic partner, your minor children or legal wards.)

If you answered "Yes," please provide details:

		Monthly Income	Name and address of source of
Name	Type of Income	Amount	additional income
Transportation	90,000.00		Colonia Loma Linda Sur
of executive			Calle [Illegible]
passengers			House 3133
Apartment	10,000.00		
Taxis	15,000.00		
[Illegible]	8,000.00		

IT IS IMPORTANT TO NOTE:

Declarant is required to file a separate schedule of all the property that is part of the assets of his/her spouse, domestic partner, children under his/her custody and legal wards, as well as the property of others under his/her management, indicating, where appropriate, the liability that may impact them.

C. PROPERTY

Under each subheading below, list your real property and personal property, as well as that of your spouse or domestic partner, and that of your minor children or legal wards. Use a separate line for each property declared. If necessary, please use additional sheets.

C1. REAL PROPERTY

Do you own real property?	Yes ⊠	No □
(Real Property means land, lots,	, parcels, buildings, ho	uses of residence, rental houses, farms
and the like.) Attach a copy of th	ne corresponding publ	ic deed.

Type of Property	Method of acquisition	Type of use	Location	Registration No. Folio Page		Value Improvements
House	Purchase	Place of residence	Loma Linda		3,000,000	
House	"	Rental	Los Llano		250,000	

C.2. PERSONAL PROPERTY

C.2.1 Do you own a vehicle? Yes oximes No oximes

Use additional sheets, if necessary. For each vehicle, attach a copy of inspection receipt, import invoice or policy, if applicable.

Make	Year	Туре	Plate	Puchase Price	Purchased from:
Toyota	2013	Pickup		\$38,900	Corporacion Flores
Hunday [Illeg.]	2012	Tourism		\$16,900	SYRE
Honda Fit	2010	Tourism		\$10,500	Individual
Honda CRV	2010	SUV		\$18,000	Individual

C.2.5 Do you own any weapons? Yes ⊠ No □										
If there are not enough blank spaces, use addiitonal sheets.										
Туре	Caliber	· S	erial No	. Registr	ation No).	Value Comments			mments
Handgun	9mm					10,	00.00		Purc	hased [illegible]
List all sav	C.2.6 ACCOUNTS AND DEPOSITS List all savings and checking accounts, certificates of deposit at domestic and foreign financial institutions.									
Instituti	on's Nan	ne	Accou	ınt Type	Accour	nt No.	Source of Funds	L.	US\$	Current Balance
Banco Atl	antida									
C.2.7 PRO	BATE RI	IGHTS	;							
List below have rece				ou, your s	spouse,	your o	domestic p	artne	r or yo	ur minor children
Party's N	lame F	Relatio	onship	Judgme	ent No.	Date	V	alue d	of inher	ited property
C.2.8 OT	C.2.8 OTHER PROPERTY									
Stock, bonds, securities:										
If you hav	If you have set up trusts, list below the bank or trust company and indicate the type of trust.									

Case 1:15-cra@0174-5G5r-Dogumaenc376f23cuFiled 04625619FRese 71020/21 Page 6 of 11

D.3 OTHER OBLIGATIONS

Do you have other obligations?	Yes □	No ⊠
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OTHER OBLIGATIONS

Obligor	Type of Obligation	Collateral	Amount of Debt	Date of Issue	Term	Monthly Payment

E. MONTHLY EXPENSES

(List all your personal expenses, those of your spouse or domestic partner, minor children and legal wards.)

Description	Lempiras
Food	6,000.00
Utilities payments	3,000.00
Dwelling rent	Own
Education expenses	10,000.00
Health-related expenses	8,000.00
Premium and insurance payments (life, health, auto)	7,800.00
Tax payments (total yearly payment)	[illegible]
Vehicle registration (total yearly payment)	8,000.00
Entertainment expenses (travel or vacations)	NO
Other Expenses	Several
TOTAL	62,000.00

	RECEIPT		9562			0779562
RECE			XPIRES	RECEIPT		EXPIRES
I RECE		_	AT IILS	RECEIL		EXT INES
	R.T.N.	PLATE No.	YEAR	R.T.N.	PLATE No.	. YEAR
		OWNER			OWNER	
	LESSEE'S	SNAME		LESSEE'S	NAME	
	VEHICLE	DESCRIPTION			DEBIT	CREDIT
MAKE		YEAR		YEARLY FEE		
MODEL		CYL.		FINE		
TYPE				REPAIRS		
COLOR				MUNICIPAL FEE		
ENGINE						
BODY				TOTAL		
VIN				TOTAL PAID		
l						

DECEMPT	0779558		0779558		
RECEIPT RECEIPT	EXPIRES	RECEIPT	EXPIRES		
R.T.N.	PLATE No. YEAR	R.T.N.	PLATE No. YEAR		
	OWNER		OWNER		
LESSEE'S N	NAME	LESSEE'S I	LESSEE'S NAME		
VEHICLE D	DESCRIPTION		DEBIT CREDIT		
MAKE	YEAR	YEARLY FEE			
MODEL	CYL.	FINE			
TYPE		REPAIRS			
COLOR		MUNICIPAL FEE			
ENGINE					
BODY		TOTAL			
VIN		TOTAL PAID			

RECEIPT		0779564				0779564
RECE	IPT	F.	XPIRES	RECEIPT		EXPIRES
NECE	RECEIPT		AI INES	NECEN 1	EXT INES	
	R.T.N.	PLATE No.	YEAR	R.T.N.	PLATE No.	. YEAR
		OWNER			OWNER	
LESSEE'S NAME			LESSEE'S NAME			
	VEHICLE DESCRIPTION				DEBIT	CREDIT
MAKE		YEAR		YEARLY FEE		
MODEL		CYL.		FINE		
TYPE				REPAIRS		
COLOR				MUNICIPAL FEE		
ENGINE						
BODY				TOTAL		
VIN				TOTAL PAID		

0779558 RECEIPT						0779558	
BE05			VDIDEC	RECEIPT		EVELDES	
RECE	RECEIPT		EXPIRES			EXPIRES	
	R.T.N.	PLATE No.	YEAR	R.T.N.	PLATE No.	YEAR	
		OWNER			OWNER		
	LESSEE'S NAME			LESSEE'S NAME			
	VEHICLE	DESCRIPTION			DEBIT	CREDIT	
N 4 A 1/F	VEHICLE			VEADLY FEE	DEBII	CREDIT	
MAKE		YEAR		YEARLY FEE			
MODEL		CYL.		FINE			
TYPE				REPAIRS			
COLOR				MUNICIPAL FEE			
ENGINE							
BODY				TOTAL			
VIN				TOTAL PAID			

0779561 RECEIPT						0779561	
RECE	RECEIPT		EXPIRES		RECEIPT EXPIRES		
	R.T.N.	PLATE No.	YEAR	R.T.N.	PLATE No.	YEAR	
		OWNER			OWNER		
	LESSEE'S NAME			LESSEE'S NAME			
LESSEE 3 NAIVIE				LLJJLL J	VAIVIE		
		D. C. C. D. L. D. L. C. L.			5-51-	005017	
	VEHICLE	DESCRIPTION			DEBIT	CREDIT	
MAKE		YEAR		YEARLY FEE			
MODEL		CYL.		FINE			
TYPE				REPAIRS			
COLOR				MUNICIPAL FEE			
ENGINE							
BODY				TOTAL			
VIN				TOTAL PAID			